SECOND REGULAR SESSION

SENATE BILL NO. 636

98TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR HEGEMAN.

Pre-filed December 1, 2015, and ordered printed.

5057S.01I

ADRIANE D. CROUSE, Secretary.

AN ACT

To repeal section 191.237, RSMo, and to enact in lieu thereof three new sections relating to health information organizations.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Section 191.237, RSMo, is repealed and three new sections

- 2 enacted in lieu thereof, to be known as sections 191.236, 191.237, and 191.238,
- 3 to read as follows:
 - 191.236. As used in sections 191.236 to 191.238, the following
- terms shall mean:
- 3 (1) "Approved health information organization", a health 4 information organization approved under section 191.238;
- 5 (2) "Fine or penalty", any civil or criminal penalty or fine, tax,
- 6 salary or wage withholding, or surcharge established by law or by rule
- 7 promulgated by a state agency pursuant to chapter 536;
- 8 (3) "Health care system", any public or private entity whose
- 9 function or purpose is the management of, processing of, or enrollment
- 10 of individuals for or payment for, in full or in part, health care services
- 11 or health care data or health care information for its participants;
- 12 (4) "Health information organization", an organization that
- 13 oversees and governs the exchange of health-related information among
- 14 organizations according to nationally recognized standards.
 - 191.237. 1. No law or rule promulgated by an agency of the state of
- 2 Missouri may impose a fine or penalty against a health care provider, hospital,
- 3 or health care system for failing to participate in any particular health
- 4 information organization.

2. A health information organization shall not restrict the exchange of state agency data or standards-based clinical summaries for patients for federal Health Insurance Portability and Accountability Act (HIPAA) allowable uses. Charges for such service shall not exceed the cost of the actual technology connection or recurring maintenance thereof.

- 3. [As used in this section, the following terms shall mean:
- 11 (1) "Fine or penalty", any civil or criminal penalty or fine, tax, salary or 12 wage withholding, or surcharge established by law or by rule promulgated by a 13 state agency pursuant to chapter 536;
 - (2) "Health care system", any public or private entity whose function or purpose is the management of, processing of, or enrollment of individuals for or payment for, in full or in part, health care services or health care data or health care information for its participants;
 - (3) "Health information organization", an organization that oversees and governs the exchange of health-related information among organizations according to nationally recognized standards.] All approved health information organizations shall exchange standard-based clinical summaries for patients and all clinical and claims data from any agency within the state with all other approved health information organizations within the state. Failure to exchange such information shall result in the suspension or revocation of approval status by the Missouri health information exchange commission and the immediate termination of any contracts, grants, and any other form of state funding.
 - 4. (1) The state, including all administrative agencies and departments, shall not convey "state designated entity" status to any health information organization. The state shall recognize all approved health information organizations as being equally eligible for any financial support from the state, or assistance or support from the state in securing any other source of funding. The state shall not exchange health information with any nonapproved health information organization unless otherwise required by law.
 - (2) Only approved health information organizations shall be qualified to respond to contracting procurement opportunities and shall be awarded contracts, subject to the provisions of chapter 34, provided that the state shall not award any contract to any health

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41 information organization as a single feasible source vendor under 42 section 34.044.

- 43 (3) Beginning August 28, 2016, all existing single feasible source 44 vendor contracts awarded to health information organizations 45 operating within the state shall receive no further appropriations.
- 5. The state shall not restrict that availability of or access to any state agency-sponsored data sets, including but not limited to, MO HealthNet patient level claims data and MO HealthNet patient level clinical data to any approved health information organization.
 - 6. A health care provider or nonapproved health information organization may disclose protected health information to any state agency for any public health purpose that is required by law without authorization from the Missouri health information exchange commission. Nothing in this act shall be construed to limit the use, transfer, or disclosure of protected health information as required or permitted by the Health Insurance Portability and Accountability Act (HIPAA) or any other provision of law.

191.238. 1. There is hereby created a "Missouri Health Information Exchange Commission". The commission shall consist of seven members, one of which shall be a member of the senate appointed by the president pro tempore of the senate, one of which shall be a member of the house of representatives appointed by the speaker of the house of representatives, one of which shall be the chair of the joint committee on administrative rules, one of which shall either be the chair of the house budget committee or the chair of the senate appropriations committee on an annual revolving appointment, and with one primary care provider appointed by the speaker of the house of representatives and one health systems representative and one 12 health information technology professional serving in the capacity as a chief information officer with an understanding of information 13 sharing, Health Insurance Portability and Accountability Act (HIPAA) regulations, and data security best practices appointed by the president 15 pro tempore of the senate. The commission members shall be residents 16 of Missouri and shall not be and shall not have any common 17 membership with the entities and individuals appointed to the Missouri 18 health information technology advisory board, the Missouri health 19 information organization board of directors, the Missouri health 20

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21connection board of directors, or any entities or individuals appointed 22 to any board of any health information organization with an interest 23 in providing health information exchange services within the state.

- 2. Commission members shall elect annually from the members a chairman and a vice-chairman.
- 3. The term of office for each member of the commission shall coincide with the term of their elected office if they are elected officials. The term of office for nonelected members shall be three 29 years, except that of the initial appointments, one member shall be appointed for a term of one year and two members shall be appointed 30 for a term of two years. Any member may be removed from the 31 commission if four or more members vote for their removal in any 32regularly held or emergency scheduled meeting. Three months before 33 the expiration of the term of an elected official member appointed by 34 the speaker of the house of representatives and the president pro 36 tempore of the senate, the speaker and the president pro tempore shall 37 appoint a successor whose term begins on January first next following. Three months before the expiration of the term of any 38 nonelected member, the members of the current commission shall 39 submit recommendations to the speaker of the house of representatives 40 and the president pro tempore of the senate to fill the position. All 41 nonelected members shall be eligible for reappointment. If there is a 43 vacancy for an elected official member for any cause, the speaker of the house of representatives and the president pro tempore of the senate shall make an appointment to become effective immediately for the 46 unexpired term. If there is a vacancy for a nonelected member for any cause, the chairman or vice-chairman shall call an emergency meeting and the commission shall make an appointment for the vacant seat to become effective immediately for the unexpired term.
 - 4. Each member of the commission shall serve without compensation but shall be reimbursed for actual and necessary expenses incurred in the performance of their duties.
 - 5. The commission shall have the authority to:
 - (1) Develop a process by which a health information organization may receive approval status from the commission. The approval process shall include compliance with commonly and equally applied standards designed to ensure the following:

(a) Adherence to nationally recognized standards for interoperability between approved health information organizations and the promotion of standards that allow data to flow as seamlessly as possible between the approved health information organizations;

- (b) Conduct of operations in a transparent manner to promote consumer confidence;
- (c) Adoption and adherence to rules promulgated by the commission regarding access to and use and disclosure of protected health information maintained by or on an approved health information organization;
- (d) Financial and operational sustainability in the absence of state and federal funding; and
- (e) Maintenance of policies and procedures to address data security, including breaches, mandatory cyber insurance coverage, data usage policies and guidelines, and oversight processes and internal auditing practices for addressing data requests;
- (2) Develop a process for the investigation of reported complaints and concerns regarding an approved health information organization, as well as develop and impose the appropriate proactive and remedial measures to address any identified deficiencies; and
- (3) Develop a process by which an approved health information organization shall be reapproved at appropriate intervals, provided that the health information organization demonstrates continuing compliance with the approval standards under subdivision (1) of this subsection. The reapproval process shall include the following:
- (a) An application for reapproval that shall be mailed to each previously approved health information organization in the state at its last known address. Failure to receive the application form shall not relieve a health information organization of the duty to apply for reapproval or the duty to pay any applicable application fees. The application shall include, but not be limited to, disclosure of the following:
 - a. The applicant organization's name and office address;
- b. A listing of all connections with approved health information organizations in this state for the purpose of exchanging standardbased clinical summaries for patients and all clinical and claims data from any agency within the state;

- 95 c. The presence of any past or current data security issues and 96 breaches;
- 97 d. Proof of mandatory cyber insurance coverage;
- 98 e. Copies of all data usage policies and guidelines;
- 99 f. A description of oversight processes and internal auditing 100 processes;
- g. Cash flow projections for the next two years depicting all forms of revenues and expenses; and
- h. Financial documents, including the most recent audited financial statement, the most recent monthly income and balance sheet, and the most recent profit-loss statements;
- 106 (b) Failure to apply for reapproval status by the deadline set by 107 the commission shall be cause for immediate suspension of approved 108 status; and
- (c) The commission shall establish application fees as deemednecessary to sustain essential administrative functions.

Bill

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